

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of
 Paul E. Salyer)
 Serial No.:) Group:
 Filed: November 25, 2003)
 Title: ORTHOPAEDIC ROTARY REAMER WITH)
 IMPLANT COMPLIANT CUTTING TEETH) Examiner:

INFORMATION DISCLOSURE STATEMENT

MS DD
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

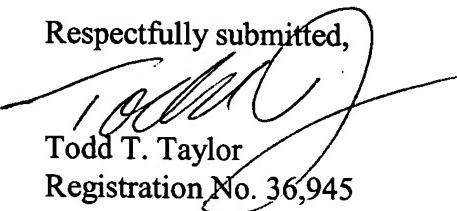
Sir:

Applicant wishes to bring to the attention of the Examiner the documents identified on the attached form PTO-1449. Applicant respectfully requests that these documents be made of record in the present application.

A copy of each of the documents is enclosed.

In the event Applicant has overlooked the need for a payment of fee, or additional payment of fee, or have overpaid a fee, Applicant hereby conditionally petitions therefor and authorizes that any charges or credits be made to Deposit Account No. 20-0095, TAYLOR & AUST, P.C.

Respectfully submitted,


 Todd T. Taylor
 Registration No. 36,945

Attorney for Applicant

TTT/dc

CERTIFICATE OF MAILING

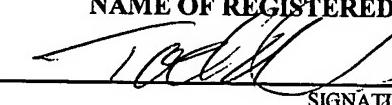
TAYLOR & AUST, P.C.
 142 S. Main St.
 P.O. Box 560
 Avilla, IN 46710
 Telephone: 260-897-3400
 Facsimile: 260-897-9300

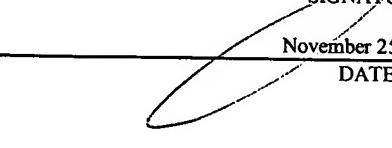
Encs.: Form PTO-1449
 Return Postcard

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: MS DD, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on: November 25, 2003.

Todd T. Taylor, Reg. No. 36,945

NAME OF REGISTERED REPRESENTATIVE


 SIGNATURE


 November 25, 2003

DATE

					ATTORNEY DOCKET NO.: SMI0100.US	SERIAL NO:		
INFORMATION DISCLOSURE STATEMENT					APPLICANT: Paul E. Salyer			
					FILING DATE: November 25, 2003	GROUP:		
U.S. PATENT DOCUMENTS								
Examiner Initial *		Document No.	Date	Name	Class	Subclass	Filing Date	
	AA							
	AB							
	AC							
	AD							
	AE							
	AF							
	AG							
	AH							
	AI							
	AJ							
	AK							
FOREIGN PATENT DOCUMENTS								
							Translation	
		Document No.	Date	Country	Class	Subclass	Yes	No
	AL	03/059178	7/2003	PCT	A61B 17	16		X
	AM							
	AN							
	AO							
	AP							
OTHER REFERENCES (INCLUDING AUTHOR, TITLE, DATE, PERTINENT PAGES, ETC.)								
EXAMINER:			DATE CONSIDERED:					
*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.								